lection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Applicationer Optical Number 59		
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1,16(a), (b), or (c))		c))									•
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			:								
EXAMINATION FEE (37 CFR 1.16(o), (p); or (q))				$\overline{}$							·
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20	,	•		x =		OR	x =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))		MS	minus 3				x =			х =	
APP FEE	PLICATION SIZE	sheets of is \$250 (\$ additional	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) * If the difference in column 1 is less than zero, enter *0" in column 2.							TOTAL			TOTAL	;
9	APPLICATION AS AMENDED - PART II 7-29-05 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT					1	SMALL ENTITY RATE (\$) ADOI-		OR.	OTHER THAN SMALL ENTITY RATE (5) ADDI-	
AMENDMENT .	Total	AFTER AMENDMENT	Minus	PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE (\$)			• TIONAL FEE (\$)
N	(37 CFR 1,16()) Independent (37 CFR 1,16(1))	17	Minus	00	= 4		х =	<u> </u>	OR	x · =	
Ę.	OF CFR 1,100th	DECESTION Size Fee (37 CFR 1.16(e))					x =		OR	x =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0))								OR		
PROST PRESENTATION OF INCLUDE DEPENDENT SOUR (IS OF A LING)						j 1	TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
Vtc	2905	(Column-1)		(Column 2)	(Column 3)		•				
M L	RCE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (5)	ADDI- TIONAL FEE (\$)
2	Total (37 CFR 1.16(1))	. 14	Minus	-22	2		х =		OR	х =	
AMENDMENT	Independent (37 CFR 1.16(b))	· 3	Minus	- 6	•		х =	•	OR	х =	
¥	Application Size Fee (37 CFR 1.16(s))					}			┨		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))								OR		
$^{\circ}$ If the entry in column 1 is less than the entry in column 2, write $^{\circ}$ 0° in column 3.							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	.790
"If the Prighest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".											

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

"If the "righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclindual case, any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.